

Revised 7/23/18

TOWN OF WEBSTER

350 MAIN STREET WEBSTER, MASSACHUSETTS 01570 (508) 949-3800 ext 1002 planning@webster-ma.gov www.webster-ma.gov

FORM A APPLICATION FOR ENDORSEMENT OF PLAN BELIVED NOT TO REQUIRE APPROVAL (ANR)

DATE: 10-11-18 1. OWNER OF RECORD: Robert L.& Susan J. Breault Full Address: 38 Laurelwood Drive Webster, MA 01570 Phone: 8603770151 Email: 100est. bleau H@ A1 Deed recorded in the Worcester District Registry of Deeds: Book: 562/2 Page: 276 ASSESSORS ID: 62 D 4 0 2. NAME OF APPLICANT: Same Full Address: Phone: Email: 3. ENGINEER / LAND SURVEYOR: John R. Forren Full Address: P.O. Box ZGG Webster, MA 01570 Phone: 508 245-0384 Email: farrensurvey@ GMail. Com 4. NAME OF AGENT / CONTACT PERSON: John R. Forren Full Address: P.O. Box 266 Webster, MA 200 Gorc Rd. Webster, MA Q1590 Phone: 508 745-0384 Email: forrensurvey & 6 Mail. Com 5. LOCATION OF LAND: on the side of Laure wood Dr. (Street where property has frontage) feet _______ of ______ E/mwood Lone.

(N/S/E/W) Nearest adjacent s (# of feet) Nearest adjacent street Total Acreage 9 702 SF Zoning District(s) including overlay districts 29ke 500 6. Has the Zoning Board of Appeals, Planning Board or Board of Selectmen granted any variance, exception, or special permit concerning this property? Yes _______ No____ If yes, please explain / list including dates:

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7.	FRONTAGE: The division of land shown on the according to the shown on said plan has the required amount Subdivisions Rules and Regulations and is on a public	t of frontage in accordance w	livision. vith the Town Webster's	
	Laurelwood Drive	on Control Law		
	which qualifies a lot for frontage under the Subdivision Control Law.			
8.	AFFIDAVIT by Engineer / Land Surveyor who stamp (attached attested document)	ped / signed the plan that all i	tems requires are shown	
9	REQUIRED SIGNATURES			
	Please Note: Both required signatures 9A and 9B mu Required signatures are the responsibility of the App Failure to obtain all required signatures may cause a	olicant.	ission to the Town Clerk.	
	. REQUIRED SIGNATURE(S): APPLICANT AND/OR OWNER: Both Applicant and at least one roperty Owner signature must be submitted.			
	The undersigned, being the APPLICANT and OWNER(S) named above, hereby applies for approval of Special Permit by the Planning Board and certifies that, to the best of the APPLICANT'S knowledge a belief, the information contained herein is correct and complete and that said PLAN conforms with a requirements of the Zoning By-Law of the Town of Webster, MA.			
	Applicant's Signature / Mallell	4	Date:	
	Property Owner's Signature(If Not Applicant)			
	B. REQUIRED SIGNATURE: TAX COLLECTOR	OR		
To be completed by the Tax Collector: The Office of the Tax Collector verifies that there are no outstart taxes due by the Property Owner to the Town of Webster, MA. Note: Delinquent bills must be paid in full before your application can be processed. Please make arrangements to pay all outstanding bills at the Tax Collector's Office.			t there are no outstanding	
			processed. r's Office.	
	Katte Dunne	(N)	10/11/18	
	Tax Collector's Office - Name (Please Print)	Initial	Date	
-	Note: It is highly recommended that a pre-filing to Department be conducted prior to	review of the Application packe to submission to the Town Cler	et by the Planning k.	
	Robert T. Cawer	10/11/2018	12:55 p.m	
	Town Clerk Signature	Date Received	Time Received	
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Revised 8/29/18

Affidavit ANR Plan Submittal

I, John R.	Farren
-,	(Name of Surveyor/Engineer – Please Print)
hereby attest that all aboand completely shown	ove information, required by the Webster Subdivision Rules and Regulations, is accurately on the plan of land
dated _Septemb	er, 19, 2018
regarding MAP(s)	2 LOT #(S) D 4 0
on <u>36 Lauel</u>	(property address) in the Town of Grafton.
10	
	Signature: Or R. Farm
	Address <i>P.O. Box</i> 266
	City/Town Webster, MA
	State ZIP
*	Phone: 508 245-0384